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| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | | Attorney Docket No. 20609/261 (PD 02027) | |
| | | First Inventor Jennings et al. | |
| | | Title METHODS FOR ASSESSMENT OF PLATELET AGGREGATION | |
| | | Express Mail Label No. EL983812097US | |

2264 U.S. PTO
 10/6/98 6309
 101503

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|--|-----------|---|--------------------|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 24] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications <i>(if applicable)</i> - Statement Regarding Fed sponsored R & D <i>(if applicable)</i> - Reference to sequence listing, a table, or a computer program listing appendix <i>(if applicable)</i> - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4] 5. Oath or Declaration [Total Pages <input type="checkbox"/>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Unsigned c. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____ | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ / _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | |
| 19. CORRESPONDENCE ADDRESS | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label | | <input checked="" type="checkbox"/> Correspondence address below | |
| Name Nixon Peabody LLP | | | |
| Address Clinton Square, P.O. Box 31051 | | | |
| City | Rochester | State | NY |
| Country | USA | Zip Code | 14603-1051 |
| | Telephone | (585) 263-1128 | Fax (585) 263-1600 |
| Name (Print/Type) Edwin V. Merkel | | Registration No. (Attorney/Agent) 40,087 | |
| Signature  | | Date October 15, 2003 | |

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 932)

Complete if Known

Application Number

Filing Date

First Named Inventor

Jennings et al.

Examiner Name

Art Unit

Attorney Docket No.

20609/261 (PD 02027)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit
Account
Number

14-1138

Deposit
Account
Name

Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code | Fee (\$) | Small Entity Fee Code | Fee (\$) | Fee Description | Fee Paid |
|-----------------------------|-------------|-----------------------------|-------------|------------------------|----------|
| 1001 | 770 | 2001 | 385 | Utility filing fee | 770 |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |

SUBTOTAL (1) (\$ 770)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 29 | -20** = 9 | X 18 | = 162 |
| Independent Claims | 3 | -3** = 0 | X = 0 |
| Multiple Dependent | | X | = 0 |

| Large Entity Fee Code | Fee (\$) | Small Entity Fee Code | Fee (\$) | Fee Description |
|-----------------------------|-------------|-----------------------------|-------------|--|
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid |
| 1204 | 86 | 2204 | 43 | ** Reissue independent claims over original patent |
| 1205 | 18 | 2205 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 162)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code | Fee (\$) | Small Entity Fee Code | Fee (\$) | Fee Description |
|-----------------------------|-------------|-----------------------------|-------------|--|
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet |
| 1053 | 130 | 1053 | 130 | Non-English specification |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month |
| 1401 | 330 | 2401 | 165 | Notice of Appeal |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |
| 1403 | 290 | 2403 | 145 | Request for oral hearing |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |
| 1502 | 480 | 2502 | 240 | Design issue fee |
| 1503 | 640 | 2503 | 320 | Plant issue fee |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0)

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

- ☐ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____
Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450
- ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____

Date

Signature

Typed or printed name

SUBMITTED BY

Name (Print/Type)

Edwin V. Merkel

Registration No.
(Attorney/Agent)

40,087

Signature

Edwin V. Merkel

Complete (if applicable)

Telephone

(585) 263-1128

Date

October 15, 2003

SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATE

DOCKET NO.: 20609/261 (PD 02027)

APPLICANTS: Lisa K. Jennings and Melanie M. White

TITLE: METHODS FOR ASSESSMENT OF PLATELET AGGREGATION


Certificate is attached to the **Utility Patent Application Transmittal Letter (1 page) (in duplicate) and Fee Transmittal (1 page) (in duplicate)** of the above-named application.

“EXPRESS MAIL” NUMBER: EL983812097US

DATE OF DEPOSIT: October 15, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service “Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Patricia Knisley
(Typed or printed name of person
mailing paper or fee)


(Signature of person mailing paper
or fee)

EXPRESS MAIL CERTIFICATE

DOCKET NO.: 20609/261 (PD 02027)

APPLICANTS: Lisa K. Jennings and Melanie M. White

TITLE: METHODS FOR ASSESSMENT OF PLATELET AGGREGATION

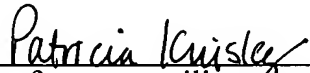
Certificate is attached to the **Patent Application including specification, claims and abstract (24 pages), UNSIGNED Combined Declaration and Power of Attorney (2 pages)** of the above-named application.

"EXPRESS MAIL" NUMBER: EL983812097US

DATE OF DEPOSIT: October 15, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Patricia Knisley
(Typed or printed name of person
mailing paper or fee)


(Signature of person mailing paper
or fee)

EXPRESS MAIL CERTIFICATE

DOCKET NO.: **20609/261 (PD 02027)**

APPLICANTS: **Lisa K. Jennings and Melanie M. White**

TITLE: **METHODS FOR ASSESSMENT OF PLATELET AGGREGATION**

Certificate is attached to the **Drawings (4 sheets)** of the above-named application.

"EXPRESS MAIL" NUMBER: **EL983812097US**

DATE OF DEPOSIT: **October 15, 2003**

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Patricia Knisley
(Typed or printed name of person
mailing paper or fee)

Patricia Knisley
(Signature of person mailing paper
or fee)